## Per Rule §15-1-14.4.2 renewal applications must be <u>RECEIVED</u> in our office by June 15th in order to allow time to process by June 30<sup>th</sup>

If a completed application for renewal is not received in the Board office on or before June 30 of the year in which it expired, the license is expired. Renewal applications received after June shall require the payment of a late fee in the amount of \$150.00 in addition to the renewal fee. Renewal applications not received by the first day of August each year shall require the payment of a reinstatement fee of \$250.00 in addition to the renewal fee.

## West Virginia Board of Pharmacy 1207 Quarrier St. 4th Floor Charleston, WV 25301 APPLICATION FOR PERMIT AND/OR RENEWAL TO OPERATE AS A Third-Party Logistics Provider (3PL) July 1, 2024 to June 30, 2026

AND ALL STATEMENTS MADE ARE TRUE AND CORRECT. <u>Annual Fees: (Biennial Renewal-Listed fees should be doubled)</u> NOTE: Every initial application for a permit shall be accompanied by the required fee of \$750.00. The renewal of such permit or license shall be \$750.00 ANNUALLY. If handling Controlled Substances, an additional fee for the Controlled Substance Handling Permit of \$50.00 is required, for a total fee of \$750.00 ANNUALLY. If handling Controlled Substances, an additional fee for the Controlled Substance Handling Permit of \$50.00 is required, for a total fee of \$750.00 ANNUALLY.			A	S A Third- July 1	-Party Lo L, 2024 t	-						
(Address change to a new location, building or facility requires new application & fee)       (Ownership change requires new application & fee)         Check One:      New Application      Renewal         WV Wholesale License #: <u>3PL</u>	Current	name and addre	'SS:			Old nan	ne, addr	ess, and	license #	:		
WV Wholesale License #: <u>3PL</u>	(Addres or facilit	s change to a nev ty requires new a	w location, build application & feature for the second secon	ding e)					-	-	on & fee)	
DEA#:												
PHONE #:					Email Ad	dress:						
List other state(s) of licensure: 123456789 Doing Business As: Individual Partnership Corporation Attach a list of current owner, partners, or corporate officers and title. Have your premises been inspected for safeguards relative to the Act?yN Check here if handling Controlled Substances. Circle applicable drug schedules: C-I C-II C-III C-IV C-V TO THE BEST OF YOUR KNOWLEDGE To the best of your knowledge, have any owners, partners, corporate officers or any employees with access to drug stock ever been convicted of a felony? If so, attach a detailed statement. Are any registered pharmacists employed? If yes, please attach a list. AFFIDAVIT: I DO SOLEMNLY SWEAR AND AFFIRM THAT I AM THE AUTHORIZED PERSON TO SIGN FOR THIS APPLICATION FOR LICENSURE AND ALL STATEMENTS MADE ARE TRUE AND CORRECT. Annual Fees: (Biennial Renewal-Listed fees should be doubled) NOTE: Every initial application for a permit shall be accompanied by the required fee of \$750.00. The renewal of such permit or license shall bi \$750.00 ANNUALLY. If handling Controlled Substances, an additional fee for the Controlled Substance Handling Permit of \$50.00 is required, for a total fee of						FAX#:						
Attach a list of current owner, partners, or corporate officers and title.         Have your premises been inspected for safeguards relative to the Act?       _y _N        Check here if handling Controlled Substances. Circle applicable drug schedules: C-I       C-II       C-III       C-IV       C-V         TO THE BEST OF YOUR KNOWLEDGE         To the best of your knowledge, have any owners, partners, corporate officers or any employees with access to drug stock ever been convicted of a felony? If so, attach a detailed statement.         Are any registered pharmacists employed? If yes, please attach a list.       IDO SOLEMNLY SWEAR AND AFFIRM THAT I AM THE AUTHORIZED PERSON TO SIGN FOR THIS APPLICATION FOR LICENSURE AND ALL STATEMENTS MADE ARE TRUE AND CORRECT.         Annual Fees: (Biennial Renewal-Listed fees should be doubled)         NOTE: Every initial application for a permit shall be accompanied by the required fee of \$750.00. The renewal of such permit or license shall bi \$750.00 ANNUALLY. If handling Controlled Substances, an additional fee for the Controlled Substance Handling Permit of \$50.00 is required, for a total fee of \$750.00 ANNUALLY.						5	6	_ 7	8	9	_	
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You must attach copies of your Home State License, most current inspection report and Federal (DEA) controlled substance registration. If you	\$750.00 ANNUALL \$800.00.	Y. If handling Contr	rolled Substances	s, an additior	nal fee for t	he Contro	lled Subs	tance Har	ndling Per	mit of <b>\$50</b>	.00 is require	ed, for a total fee o

are located outside the state of West Virginia, you must attach copies of your federal and state controlled substance registrations, if shipping controlled substances.

Signature:\_\_\_\_\_\_

Title:\_\_\_\_\_